

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>KA</i>	<i>7591</i>	<i>2/23</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>3/7/00</i>
FORMALITY REVIEW	<i>AW</i>	<i>72346</i>	<i>4/1/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/2/00
2	✓	✓	5/2/00
3	✓	✓	5/2/00
4	✓	✓	5/2/00
5	✓	✓	5/2/00
6	✓	✓	5/2/00
7	✓	✓	5/2/00
8	✓	✓	5/2/00
9	✓	✓	5/2/00
10	✓	✓	5/2/00
11	✓	✓	5/2/00
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14	✓	✓	5/2/00
15	✓	✓	5/2/00
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If more than 150 claims or 10 actions  
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